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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application No. 09/888061

Filing Date June 21, 2001

First Named Inventor Kenneth J. Hines

Art Unit 2122

Examiner Name TANG, Kuo Liang J.

Attorney Docket Number 42390P18902

ENCLOSURES (check all that apply)						
Fee Transmittal	Form	Drawing(s)	After Allowance Committo Group	unication		
Fee Attac	hed	Licensing-related Papers	Appeal Communication of Appeals and Interfere	to Board ences		
Amendment / Re	esponse	Petition	Appeal Communication (Appeal Notice, Brief, Reply B	to Group		
After Fina Affidavits	ıl /declaration(s)	Petition to Convert a Provisional Application	Proprietary Information			
Extension of Tim	ne Request	Power of Attorney, Revocation Change of Correspondence Address	Status Letter			
Express Abandonment Request Information Disclosure Statement PTO/SB/08 Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application		Terminal Disclaimer	Other Enclosure(s) (please identify below):			
		Request for Refund	Return postcard			
		CD, Number of CD(s)				
		Remarks				
1 =	Filing Fee					
	aration/POA					
Response to Missing Parts under 37 CFR 1.52 or 1.53						
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm	Gregory D. Cal	dwell, Reg. No. 39,926				
Individual name	or Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP					
Signature	A////A					
Date January 14, 2005						
CERTIFICATE OF MAILING/TRANSMISSION						
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.						
Typed or printed na	me Gayle Bekis	1				
Signature Gaul			Date January 14, 2	005		

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RANGE EE TRANSMITTAL for FY 2005
Patent fees are subject to annual revision.

Applicant claims small entity status. S e 37 CFR 1.27.

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180.00

TOTAL AMOUNT OF PAYMENT

C mplete if Known					
Application Number	09/888061				
Filing Date	June 21, 2001				
First Named Inventor	Kenneth J. Hines				
Examiner Name	TANG, Kuo Liang J.				
Art Unit	2122				
Attorney Docket No.	42390P18902				

METHOD OF PAYMENT (check all that apply) □ Check □ Credit card □ Money Order □ None □ Other (please identify): □ Check □ Credit card □ Money Order □ None □ Other (please identify): □ Charge fee(s) indicated below □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except for he filing fee □ Charge fee(s) indicated below, except for he filing fee □ Charge fee(s) indicated below, except for fee(s) □ Credit any overpayments □		_						
Deposit Account Deposit Account Number: Q2-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP	METHOD	METHOD OF PAYMENT (check all that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee	⊠Check □	□ Credit card □ Money Order □ None □ Other (please identify):						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments	Deposit A	ccount D	Deposit Ac	count N	lumber: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Za	afman LLP		
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SUBTOTAL (2) (\$) 180.00		` '			SUBTOTAL (2) (\$)	180.00		

(SUBMITTED BY Complete (if applicable					
	Name (Print/Type)	Gregory D. Caldwell	Registration No. (Attorney/Agent)	39,926	Telephone	(503) 439-8778
	Signature		MM /	**	Date	01/14/05